

## **Indiana Trauma Timeline**

- 2004 Trauma Care Task Force was first organized. One hundred people were involved at various times during the early years. The Task Force came to the following conclusions about the design of Indiana's trauma system:
- It's desirable for all hospitals to eventually be part of the statewide system.
  - Creating a statewide trauma system will mean necessary collaboration between Emergency Medical Services (EMS), hospitals, rehabilitation facilities and public health
  - Legislation will be necessary to create an identifiable and sustainable source of funding for the trauma system.
  - Injury prevention data collection and "best practices" along with widespread public education about trauma and injury will be important parts of the system.
- 2004 A one-year Health Resources and Services Administration (HRSA) grant from the federal government was obtained for the trauma program at the Indiana State Department of Health (ISDH).
- 2005 A three-year HRSA trauma/EMS grant was awarded, but the office was defunded in 2006.
- 2006 Gov. Daniels signs Public Law 155 (now codified at I.C. 16-19-3-28) ordering the ISDH to develop, implement and oversee a statewide comprehensive trauma care system. Sen. Tom Wyss (R., Ft. Wayne) led the effort to get the law passed.
- IC 16-19-3-28: State department designated as lead agency of a statewide trauma care system; rule making authority
- Sec. 28 (a) The state department is the lead agency for the development, implementation, and oversight of a statewide comprehensive trauma care system to prevent injuries, save lives, and improve the care and outcome of individuals injured in Indiana.
- (b) The state department may adopt rules under IC 4-22-2 concerning the development and implementation of the following:
- (1) A state trauma registry.
  - (2) Standards and procedures for trauma care level designation of hospitals.
- In April, the ISDH hired a trauma system manager.
- 2007 Federal funding from the National Highway Transportation Safety Administration (NHTSA 408) for the state trauma registry was received from the Indiana Criminal Justice Institute (ICJI). A contract with a trauma registry software vendor (Image Trend) was completed and a trauma system retreat was held.

Note: The ICJI funding continues today.

- 2008 Senate Bill 249, sponsored by Sen. Wyss, passes giving the Department of Homeland Security the authority to adopt EMS triage and transportation protocols.  
In September, the ISDH hired its first state trauma registry manager.  
In December, the American College of Surgeons (ACS) conducted a consultation visit during which it commented on those aspects of a trauma system in place and recommended a list of actions the state should take to improve its trauma system.
- 2009 In February, the ACS issued their consultation visit recommendations.  
In November, Gov. Daniels signed an Executive Order creating the Indiana Trauma Care Committee, which serves as an advisory body to the ISDH on all issues involving trauma.
- 2010 In February, the ISDH reported that there were 17,000 records in the trauma registry. The goal of 20,000 records “is now within reach.” NOTE: As of March 2013, there are now more than 78,000 records in the Indiana trauma registry.  
In October, the first meeting of the Indiana Trauma Care Committee (previously the Trauma Care Task Force) was held.
- 2011 In April, the Indiana Department of Homeland Security proposed a Triage and Transport rule, fulfilling the intent of Sen. Wyss’ bill (Senate Bill 249) of 2008.  
In August, the ISDH hired a trauma and injury prevention division director, prioritizing trauma as a division within the agency.  
In November, the EMS Commission adopted a rule governing Triage and Transport of injured patients. NOTE: Due to process issues with the original vote, the Commission had to reconsider that rule.
- 2012 In January, the ISDH hired three additional staff members, a Trauma Registry manager, Trauma Registry data analyst and an injury epidemiologist, expanding the trauma and injury prevention division’s expertise.  
The EMS Commission re-adopted the Triage and Transport Rule, which requires EMS providers to transport the most seriously injured patients to trauma centers.
- 2013 The ISDH and IDHS EMS Commission have worked together to approve “In the process of ACS verification” trauma centers for purposes of the Triage and Transport Rule, which will greatly increase the number of trauma centers in Indiana.